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ABSTRACT

As the number of latch key children and at-risk students increases, teachers have become one group of significant others with whom children spend much of their time. This paper focuses on students' sense of self and the teacher's role in positively impacting it, from the perspective of a model of mental health. This model places self-esteem, motivation, common sense, and the ability to learn by insight at its core. It is suggested that this state of mental health is a key to teachers eliciting and students accessing their positive sense of self and, therefore, enhancing motivation and learning. It is recommended that attention be paid to the ways in which teachers can positively impact students' sense of self, based on a model of mental health which facilitates access to the deeper self. The author asserts that for teachers to positively impact students' sense of self, they must view students in a positive way, provide an environment of socioemotional support, operate from a state of mental health themselves and interact with and relate to their students in ways that allow students to access their own mental health. (Author/BF)

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The Impact of the Teacher on Students' Sense of Self: A Perspective from a Model of Mental Health

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THE IMPACT OF THE TEACHER ON STUDENTS' SENSE OF SELF: A PERSPECTIVE FROM A MODEL OF MENTAL HEALTH

The self has been recognized as playing a critical role in motivation and learning. Current theories of motivation, in fact, emphasize the central and primary role of the self in motivation and self-regulated learning (McCombs, 1989; McCombs & Whisler, 1989; McCombs & Marzano, 1990). That the self is influenced by the environment within which we are raised, specifically by the people with whom we come in close contact, is clear. What is less clear is the influence of significant others (parents, teachers) in drawing out students' deepest experience and perception of self, i.e., their positive "sense of self."

One group of significant others with whom our children spend much time, particularly once they are of school age, is teachers. Yet relatively little research has been directed at how this group can positively impact or elicit students' sense of self. In light of the growing numbers of latchkey children who spend significant amounts of time on their own, the increasing numbers of at-risk students who are often in desperate need of adult support, and the decreasing availability of parents or consistent caregivers to children in general, it is believed that the potential of the teacher to positively impact today's children's sense of self deserves increased attention. As Ginott (1970) said so poignantly:

> I have come to a frightening conclusion. I am the decisive element in the classroom. It is my personal approach that creates the climate. It is my daily mood that makes the weather. As a teacher I possess tremendous power to make a child's life miserable or joyous. I can be a tool of torture or an instrument of inspiration. I can humiliate or humor, hurt, or heal. In all situations it is my response that decides whether a crisis will be escalated or de-escalated, a child humanized or de-humanized (p. 13).

This paper focuses on students' sense of self and the teacher's role in positively impacting it,

from the perspective of a model of mental health.

The Self

A positive sense of self -- whether we see and experience our self as the agent and promulgator of our actions and of what happens for us, and see and experience our self as someone with characteristics and attributes of which we can be proud -- is the foundation for the quality of all of our experiences in life and for who and what we become. Researchers as early as Krech and Crutchfield (1948) affirmed this critical role of the self --

> the self is the most important structure in the psychological field, and it is likely, under normal conditions to be one of the strongest structures. It has, therefore, a role of unparalleled significance in the determination of the organization of the field. The nature of the relationship of the self to other parts of the field -- to other objects, to people, to groups, to social organizations -- is of critical importance in understanding the individual's perception of a connection between various objects, individuals, and groups, and himself (p. 69),

as did Combs and Snygg (1959) --

> As the central point of the perceptual field, the phenomenal self is the point of orientation for the individual's every behavior. It is the frame of reference in terms of which all other perceptions gain their meaning (p. 145).

The study of the self and the self system has interested psychologists for years, but descriptions of its role in psychological functioning have been rather inconsistent. For a time, psychologists ignored the self because of their "disdain for such questionable, subjective topics as self-consciousness" (Dickstein, 1977, p. 129). With the advent of the 1980's, and an increasing dissatisfaction by psychologists of all persuasions with the cognitive and behavioral models of the 1970's, "the self has once again been resurrected as a legitimate psychological construct" (Harter, 1986, p. 137).

The Aspects of Self

Most scholars of the self have viewed the self as comprising two distinct but intertwined elements: the self as subject (the "I" self) and the self as object (the "me" self). Such a distinction was described more than 100 years ago by William James (1890/1963). James' self as subject was the "I" self or *knower*, an already existing entity which discovers itself through self-reflection and observations of the various components of the "me" self (consisting of the material self, the social self, and the spiritual self). James' self as object was the "me" self, an empirical self, a collection of things objectively known, an object of the awareness of the "I" self. The focus of James' work was on the "me" self.

More recent researchers have maintained the above distinctions. Wylie (1974), for example, talks about the "I" self as an active agent or process -- the observer -- and the "me" self as the object of one's knowledge and evaluation -- the observed. Lewis and Brooks-Gunn (1979) speak of this "duality of self" as the *existential self* -- distinct from others and the world and involved in thinking, remembering, and perceiving in mature beings -- and the *categorical self* -- the composite of attitudes, abilities, and values that makes up one's self concept.

Dickstein (1977) outlines various views of the self: the *dynamic self* has power, control, and a sense of personal agency; the *self as object* is the object of one's knowledge and evaluation; the *self as knower* is an already existing entity to be discovered through self-reflection; the *self as an integrated whole* is comprised of all aspects of the individual's nature and potential and is achieved through a lifetime of struggle; and the *'selfless' self* is considered to be a progression of change and an arbitrariness of self, rather than a self to be integrated, a state deliberately achieved through introspection and characterized by intense self-awareness. Similarly, Paranjpe (1987) describes three active aspect of the self: the *self as knower*, the *self*

as enjoyer or *sufferer*, and the *self as agent*. These aspects are related to cognition, affect, and conation, respectively.

In describing the research on the self during the past ten years, Markus and Wurf (1986) note that most theorists now view the self as being multidimensional and multifaceted rather than, as in the past, as "a stable, generalized, or average view of the self" (p. 310). Harter (1988, 1990), who herself offers a comprehensive theory of self-system structure, function, and development, points out that many current theories focus on the self as a cognitive schema, constructed over time through interactions with changing capacities and socialization experiences, and, for the most part, deal with the "me" self.

McCombs (1988. 1989) summarizes the current status of the self. Many of the recent models, she notes, focus on the nature of the cognitive representations of the self and take one of the following forms in which the self is viewed: (1) as one node among many in an associative memory network wherein information about the self is stored in memory in the form of propositions; (2) as a hierarchical category structure which includes traits, values, and memories of specific behaviors as components; (3) as a multidimensional meaning space; or (4) as a system of dual-natured self-schemas or generalizations about the self as both knower (subject) and known (object), which stem from past social experiences. These models view the self-concept as mediating most of the important intrapersonal processes (including information processing, affect, and motivation), and many of the interpersonal processes as well (including social perception, reaction to feedback, etc.). In addition, many account for both the "I" self and the "me" self in one theory.

McCombs and Marzano (1990) explicate the role of a higher, integrated self as the source

of our perceptions, affect, and behavior. Their framework specifies the

> ...*self-system* to refer to the person -- as experienced by that person and represented as an organization of knowledge and processes -- and the embodiment of structure and function....(and) the...*self* as the dynamic director or overseer of information processing: the formulator of intentions, the enactor of choices, and the generator of will or the desire to engage in skilled intellectual and behavioral activities...(p. 54).

They suggest that the metacognitive, cognitive, and affective are systems that would actually more appropriately be considered subsystems of the self, operating in support of the self and under the control of the self as agent, the "I" self. The "I" self is defined as

> ...a generative, uncontaminated consciousness...not reducible...to the structures and processes that, in part, give rise to the experience of being...(it) is more than the sum of its parts...operates at a higher level of consciousness, with the capability of overseeing, regulating, and understanding the operation of the whole self-system (p. 54).

Similarly, Harter's recent work (lecture, November 1, 1990) distinguishes between Eastern and Western perspectives of the self. Rather than being preoccupied with, protecting, "watching," and evaluating the "me" self as the Western "I" self does, the Eastern version of the "I" self goes beyond the watcher, lives life, and has its gaze focused outward rather than inward.

Suarez, Mills, and Stewart (1987), whose model of mental health is the focus of this paper, do not directly reference the notion of self. Their neocognitive model, however, distinguishes between a conditioned, insecure "level of functioning" and a higher level of consciousness -- a "deeper," "mentally healthy" level of functioning (described below). Here we have an awareness of and access to a positive sense of self: our deeper self and the experience of our potential as described in the "I" self of McCombs and Marzano (1990).

The Emerging Sense of Self

How does the deeper experience and understanding of self emerge? There is historical

precedence for a focus on social interaction as the context for the development of the self. Cooley (1902), for example, thought it impossible to consider the self as existing in isolation. He introduced the concept of the "looking glass self," the idea being that the "material" that forms the self comes from reflections provided by others. Mead (1934), too, saw the self's development as arising as a result of social interactions and responses to the feedback of others. In addition to feedback produced by the infant's own actions and from objects in the environment, Lewis and Brooks-Gunn (1979), too, attribute to social feedback, especially from the caregiver, primary importance in the development of the sense of self.

Other researchers have focused specifically on the relationship with the mother or primary caretaker and the development of self. For example, Sander (1964, 1969, 1975), in the tradition of Mahler, has formulated a model of mother-infant interaction and the emerging self. Placing more emphasis on the role of the infant than does Mahler, Sander describes a social context, provided by the coordinated behaviors of mother and infant, within which the infant's sense of self develops.

Erikson (1968) also points to the significance of the self-other relationship in the developing sense of self. For Erikson, trust is important to this development and trust comes when the child's physical and psychological needs are well taken care of by a warm, loving, and consistent "other." Harter (1986, 1987, 1990), too, has shown that social support from significant others is essential for growth and change, and, thus, for the development of a healthy sense of self. However, Harter's (in preparation) recent work on self-esteem shows that individuals who define themselves based on others' support/opinions, or on other external factors such as appearance and approval, have lower self-worth than those who experience an internal

sense of worth that is independent of others' support/opinions.

Some of the current research on the emerging sense of self in the infant provides new and interesting theories on when and how the self develops. Stern (1985), for example, assumes that a sense of self exists prior to self-awareness and language:

> By "sense" I mean simple (non-self-reflexive) awareness. We are speaking at the level of direct experience, not concept. By "of self" I mean an invariant pattern of awarenesses that arise only on the occasion of the infant's actions or mental processes. An invariant pattern of awareness is a form of organization. It is the organizing subjective experience of whatever it is that will later be verbally referenced as the "self." This organizing subjective experience is the preverbal, existential counterpart of the objectifiable, self-reflective, verbalizable self (p. 7).

Stern lays out four different senses of self, each of which defines a *domain of relatedness*, that is, a domain of self-experience and social relatedness. Rather than discrete stages that end as another begins, he postulates four overlapping phases of development, initially arising from birth to about two years of age, each of which builds on the preceding and continues to exist and develop through life. The first is the *emergent self.* Stern asserts that infants are "predesigned to be aware of self-organizing processes...(and) to be selectively responsive to external social events..." (p. 10), and, therefore, begin to experience a sense of self from birth. Second comes the *core self.* Infants "consolidate the sense of a core self as a separate, cohesive, bounded, physical unit, with a sense of their own agency, affectivity, and continuity in time" (p. 10). Four experiences are critical to the development of an organized sense of core self including self-agency, self-coherence, self-affectivity, and self-history. Third to develop is the sense of *subjective self.* Infants discover that their subjective life can be shared with others. Finally, the *verbal self* forms and a whole new world of shared meanings and possibilities for exchange occur. During this stage, for the first time, children act as if the self

"were an external category that can be conceptualized" (p. 165). In Stern's model, once each sense of self is formed, it remains fully functioning and active throughout life and continues to grow and to coexist with the other senses of self. This has important implications. Because each sense of self is not seen as being "over and done with," each is less vulnerable to irreversible initial impressions and each can be impacted throughout life.

Another fascinating theory has been put forth by Samuels (1986). While traditional developmental psychology considers the neonate to be lacking a self, and that *both* the "I" self and the "me" self must be constructed or discovered in development, Samuels posits that the neonate has a "prewired knowledge of its existence" (p. 37). The world, he asserts, contains information that "specifies the existence of the self for the neonate and infant...(and) further provides grounds for differentiation of self from other" (p. 38). Thus for Samuels, we are born with an existential sense of self, a self as subject ("I" self); and the existential ("I") and categorical ("me") selves develop on a continuum. While his approach focuses on the information-processing aspects of development, he acknowledges that we do not develop our self-awareness in a "social vacuum" (p. 47); but, rather, that social input provides a basis for the development of the self.

In similar fashion to Samuels and Stern, Mills and his colleagues (Mills, 1987; Mills, Dunham, & Alpert, 1988; Suarez et al., 1987), while not directly addressing the development of the self, state that a deeper, unconditioned, mentally healthy level of functioning is innate; that is "...every child starts out in life with an innate capacity for and a propensity...toward mental health" (Mills, 1990c, p. 5). It is proposed here that this higher, mentally healthy level of functioning provides a deeper awareness and experience of the "I" self as well as more ready

access to it.

Because of its important implications for motivation and learning, it is Suarez et al.'s (1987) neocognitive model of "mental health" that this paper highlights. The model clarifies psychological principles of mental health that are a means to experience and access the deeper experience of self, the "I" self of McCombs and Marzano (1990) -- in the context of quality interactions and relationships. This paper focuses specifically on quality teacher-student interactions and relationships.

A Model of Mental Health: Access to the Deeper Self

Suarez, Mills, and Stewart's (1987) neocognitive model reflects the perspective that while thought and thinking are recognized as central to the psychological formulation of our experience, they are not seen as the primary causal factor. Instead, our level of consciousness is seen as the fundamental factor that determines the perspective we are able to maintain relative to our cognitions (Mills, 1987). Mental health in this model is not something enjoyed by only some of us but is, in fact, possessed by and accessible to all human beings. Observations of infants and toddlers in nurturing environments, they assert, find these children eager to learn and naturally curious about things around them, unself-conscious, comfortable with themselves, motivated, learning for the sheer joy of it, and satisfied as they master their environment. They also experience, as a result of their innate "package" of mental health, self esteem (an *unconditional* feeling of well-being), the ability to learn by insight, a natural sense of concern and empathy, and an innate capacity for common sense and wisdom. They function in what Maslow called a "self-actualized" frame of mind.

If this is true, what happens? Why do so many of our youth rely on external factors to

validate their sense of worth? Why are more and more of our students at risk of dropping out of school, abusing drugs and alcohol, and engaging in other non-healthy behaviors? The mental health model originally proposed by Suarez, et al. (1987), and amplified by Mills (1987; 1990a; 1990b), accounts for "what happens" as described below.

The Psychological Principles

Providing a context for the four basic principles of this model of mental health are several underlying assumptions. First, as stated above, it is assumed that we are born with the capacity for "mental health": a "package" that includes an inborn, unconditional, positive feeling of security and well-being (self-esteem); a natural curiosity and eagerness to learn; intrinsic motivation to do our best; the ability to learn by insight; the capacity for common sense and inner wisdom; and the ability to relate to others in an unself-conscious, positive way that includes empathy and consideration. Second, it is assumed that this package can never be lost but does become obscured or covered over as, during our early experiences, we become conditioned and take on an insecure thought system. It is, however, always accessible. Third, our most natural way of functioning is in this state of mental health; we go in and out of it, naturally, all the time. Finally, the model assumes that we are capable of understanding our own psychological functioning and, when we do, we have choices about what we think and, therefore, about how we feel, act, and react. With this understanding we can more easily access our own deeper self as well as elicit others'positive sense of self. The principles which follow give rise to such an understanding.

The Principle of Thought. Our thoughts play a critical role in our experience of life. They, in fact, become perceptual filters through which we screen and interpret all data and,

consequently, they color our experience of life. As we grow from infancy, we develop our thoughts into personal thought systems, "...sophisticated, interwoven network(s) of habitual thought patterns, including concepts, judgments, attitudes, opinions, assumptions, beliefs, and expectations," which we use "...to compare, examine, theorize, generalize, measure, and remember" (Suarez et al., 1987, p. 24). Depending on environmental and developmental factors and our cognitive conditioning, these thought systems are to a greater or lesser degree composed of negative and insecure thoughts (see Figures 1 and 2).

Our thought systems maintain their own internal consistency by tending to accept that which fits with our pre-existing beliefs and views and/or by distorting what we see to fit our pre-existing view of reality. Given that we are largely unaware of this process, we operate as if our thinking is "the truth" rather than our unique, personal point of view.

Our thought systems become revealed in our perceptions, feelings, and behaviors. Thus we have a thought (e.g., I don't have enough time to accomplish this task); the thought gives rise to a feeling or feelings (anxiety, fear, panic); the feeling leads to particular behaviors or reactions (can't concentrate, avoid tackling the work, making errors); and the behaviors produce results (I don't complete the task in the time allotted). The cycle becomes a self-fulfilling prophecy because the result (not accomplishing the task) reinforces the original thought (I don't have enough time...). (See Figures 3 and 4.)

When we become aware that we are the thinker of our thoughts and thus have the power to continue, drop, or suspend any pattern of thoughts holding together a particular view of reality, we have the power to change our perceptions, feelings, and behaviors. When we are unaware that we have such a choice, we unconsciously function within the limits of our own

thought systems.

The Principle of Separate Realities. Because our thought systems are based on our stored, personal interpretations of our past experiences, and none of us have identical thoughts, our thought systems are unique. Said another way, we all live in separate realities, personal psychological frames of reference that become the source of our perceptions of reality. These realities, then, are only apparancies, only how things *appear* to be. Because we don't see things in exactly the same way as others, their actions may not always make sense to us; they do, however, make perfect sense to them, as they view the world from their own separate realities. If we want to change our view of things, we must get out of the frame of reference that is producing and maintaining that reality.

Two derivatives of this principle are: (1) We can see people as doing the best they can, given their reality or how things look to them; and (2) We don't have to take their actions personally. As a result of our ability to see our and others' thinking as a product of experience and conditioning, we can take our negative thoughts (and theirs) less seriously, become less tied to our personal view of things and more open to other possibilities, and be less reactive and defensive.

The Principle of Levels of Consciousness/Moods/Mental Health. We move in and out of different levels of consciousness, mood levels, or mental health as we go through a day. A level of consciousness is the degree of understanding of what thought systems are and how they influence our perceptions, feelings, and behavior. The "higher" levels are "healthy" states of psychological functioning. When in these states, we are more objective, rational, and clear, experiencing the freedom to choose not to respond to thoughts that create and maintain a

negative reality. The "lower" levels are more troubled and negative, often producing upset and conflict. Here we are unawaredly caught in the contents of our thought systems and unable to see beyond our own separate reality.

The quality of our thoughts and perceptions change, depending on the particular level from we are functioning. Thus, when we are in a higher mood or level of consciousness, something that might upset us when we are in a lower mood doesn't bother us. Because of this, a shift in level of consciousness or state of mind is the key to change. Rather than dealing with negative thoughts and feelings, we can shift to a higher level of consciousness or mental health, and access our deeper experience of self from which we can disengage from these thoughts and feelings and see things from beyond our own personal reality.

The Principle of Feelings and Emotions.

> Since our thought system(s) lead us to think that the world exists just the way we view it through our perceptual filters, we must find a way, other than our thinking, to recognize when we are at a lower level of functioning. The key to this recognition is found in an understanding of the role of feelings and emotions (Suarez et al., 1987, p. 51)

It is, therefore, feelings in this model that are indicators of the level of consciousness or understanding from which we are operating at any given moment. Positive feelings are indicative of higher levels of consciousness whereas negative feelings alert us that we have dropped into a lower level of understanding or consciousness. The model suggests that when we notice that we are experiencing negativity, we can know that we are "temporarily insane" -- that our thinking is "off," that is, we are viewing things from our own reality and not seeing things objectively -- and choose to slow down, calm down, and proceed with caution. Feelings, then, are indicators of our level of psychological functioning, resources we can use to keep us

on track.

The Move From Mental Health to Insecurity.

How is it, then, that our innate capacity for and inclination toward mental health becomes obscured or covered over? Specifically, the model states that children are drawn out of their natural, healthy level of functioning first through their family situations. When parents are stressed, often in a bad mood due to their own problems, frequently argumentative and/or critical of their children, inconsistent, irritable, self-conscious, etc., they interact with and relate to their children in ways that foster the development of an "insecure belief system." Because children don't understand that these relational and interactional patterns are a function of their parents' habitual states of mind, they interpret them as meaning that there is something wrong with or inadequate about them, "programming" such attributions at a fundamental level. Consequently, they enter school with a poor self-concept, insecurity about learning and performing, and a lack of trust of others, particularly adults (Suarez et al., 1987; Mills, 1986, 1987; Mills et al., 1988; Peck, Law, & Mills, 1987). These negative early childhood experiences, it is posited, interact with later school and community experiences, resulting in varying levels of alienation or, at least, "estrangement" from their own state of good mental health. Wehlage and Rutter (1986) suggest that early experiences of failure and negativity in the school environment leads to a spiral of increased negative attitudes, poor self-concept, and beliefs by the children that they don't fit in at school. When young people encounter situations that trigger their insecure states of mind, they drop into a lower mood and perceive things negatively. They then act out and/or show learning problems. When adults react in a way that judges, criticizes, or punishes, the children's initial conditioned interpretations are confirmed.

Thus, a self-fulfilling prophecy results.

Eliciting Students' Positive Sense of Self

Next it is considered what has and can be done to help break such cycles of negativity such that students are able to access and more often function from their positive sense of self.

Traditional Approaches versus a Mental Health Model

Most traditional approaches to impacting students -- whether these students are unmotivated, somewhat behind, grossly misbehaving, or seriously at risk -- have assumed that something is missing in these youth that needs to be supplied so they can or will function better, or that there is something that needs to be fixed. Consequently, they often focus on working with negative attitudes and behaviors, either trying to eliminate them through negative consequences or trying to positively reward other behaviors believing such external reinforcement is necessary to bring about change (Mills, et al., 1988). Mills and his colleagues believe that these approaches have not been particularly successful because their underlying assumptions unwittingly "...support a frame of reference...that keeps them from realizing more mentally healthy levels of functioning which...can be brought out and nurtured from within" (Mills et al., 1988, p. 644). This is because, according to the model, the two levels of functioning -- from an insecure state of mind or lower level of consciousness or a from a mentally healthy, higher level of consciousness -- *are qualitatively distinct and independent of one another*. Therefore, we cannot reach the latter by working with the content of the former.

The mental health model, on the other hand, focuses on directly accessing higher levels of mental health (and, thus, the deeper experience of self). Research demonstrates that when

external conditions that reinforce conditioned, insecure ways of reacting are eliminated, and level of mental health becomes the focus of the interactions between teachers and students, students naturally begin to function with more maturity and common sense, better behavior, more positive attitudes, better problem solving ability, and increased motivation to learn and to achieve educational goals (Mills, 1990c; Mills et al., 1988; Peck et al., 1989; Stewart, 1984).

Teachers' Impact

We all have been affected by teachers in one way or another. Teachers play an important role in how students see themselves and thus impact students' sense of self and, in turn, their motivation and learning. As Myrick and Myrick (1990) state:

> Learning, for better or for worse, is a consequence of the learning climate. That climate in a school is created by the interactions of administrators, faculty, support, staff, and students....There will always be student problems which cannot be solved easily by teachers or other personnel in a school....Yet, these problems are almost always related to dysfunctioning relationships....Student-teacher relationships are central to helping students learn and cope...(p. 13).

The literature is replete with discussion about and lists of characteristics of good teachers. This author asserts that for teachers to positively impact students' sense of self, they must view students in a positive way, provide an environment of socioemotional support, operate from a state of mental health themselves, and interact with and relate to their students in ways that allow the students to access their own mental health. These are discussed below.

Viewing Students Positively. Much has been written about the necessity of perceiving students positively in order to be an effective teacher and to empower students to be their "best self."

Sale (1979), for example, differentiates good teachers from poor teachers by how they perceive their students. Good teachers:

- have more positive perceptions;
- see students as potential friends rather than viewing them critically, assigning them with ulterior motives, and attacking them;
- use more democratic classroom procedures;
- have the capacity to see things from their students' points of view; and
- view students as self-dependent individuals to be valued and respected rather than as people to "do things to."

Similarly, Purkey and Strahan (1986) suggest that the following assumptions, when held by teachers, result in the empowerment of their students by positively impacting the students' sense of self:

- People are able, valuable, capable of self-direction, and should be treated accordingly.
- The teacher/learning process is a cooperative alliance in which process is as important as product.
- People possess relatively untapped resources in all areas of human potential.
- This potential can best be realized by environments, policies, programs, and processes that are intentionally designed to invite development, and by people who consistently seek to realize this potential in themselves and others, personally and professionally.

Purkey and Strahan, additionally, identify a stance or theoretical position from which teachers operate to best empower their students to access their potential. This position consists of four elements: (1) *trust* (giving students opportunities to make decisions and monitor their own behavior and know they are basically trusted); *intentionality* (maintaining positive expectations and determination about students realizing their potential even in the face of evidence to the contrary); *respect* (for the unique value, ability, and self-directing powers of each student whether or not it is earned); and *optimism* (a positive vision of human beings -- that

everyone is able, valuable, capable of self-direction -- and a treatment of individuals consistent with this vision).

Glenn and Nelsen (1988) identify three beliefs or perceptions that are present in successful, productive students, students with a healthy sense of self, and absent or weak in children at risk. These include strong perceptions of:

- Personal capability ("I am capable").
- Significance in primary relationships ("I contribute in meaningful ways and am genuinely needed").
- A sense of personal power or influence over life ("I can influence what happens to be or, at least, how I respond to events beyond my control").

Children, they maintain, are born with the potential for these capabilities. The capabilities are developed through experience and through apprenticeship, with children learning from those who have preceded them, and from interactions and relationships with adults who assume the above qualities are present. This includes all significant adults, and, because of their consistent presence in students' lives, particularly teachers.

Wehlage and Rutter (1986), in their studies of successful dropout prevention programs, conclude that teachers must be enthusiastic, enjoy their work, and believe that their at-risk students can learn. Students in successful programs, they note, feel hopeful about learning, positively regarded, cared about, and supported. In addition, they experience themselves in the presence of adults they see as responsible, mature, and positive; and in a school that has a distinctly family-like atmosphere.

Finally, Mills (1987) concludes that adults most able to affect high-risk youth

> ...are themselves functioning at higher levels of mental health, enjoyment of their work, are empathic and caring and are committed to involving these youth in

> their education in a more positive way. These adults are able to consistently treat students with high respect and regard, while maintaining high expectations and their authority and control in the classroom, and experiencing a minimum of stress themselves (p. 14).

Providing An Environment of Socioemotional Support. Children need an environment of socioemotional support in which to grow and develop. Close relationships with caring, supportive adults is critical, particularly today when most parents work and the extended family is often lacking (Whisler, 1990). Glenn and Nelsen (1988, p. 68) suggest the following for creating a climate of support:

1. An openness to exploring another person's point of view
2. Listening with the purpose of understanding another person's point of view
3. Empathy, which results only from careful listening
4. A genuineness conveyed through warmth and interest
5. The ownership of personal feelings
6. Respect for differing points of view.

Bills (1981) suggests that a climate of support, one in which youth can grow and change, is characterized by people who have positive attitudes, are unconditional in the expression of these positive attitudes, are empathically understanding, and are congruent in thoughts and actions thus engendering trust.

According to the Superintendent's Task Force (1987), exemplary teachers are those who provide the necessary support for students. They are sensitive to the mood of the class and to individual students; build rapport by showing students respect, treating them fairly, and trusting them; show empathy; have high expectations; and are warm and caring.

Finally, Beane and Lipka (1986), offer a checklist for ways of interacting and relating

to students that provide a climate of socioemotional support. It includes among others: accepting students as human beings, regardless of their background; enjoying the diversity of individual differences in the group; providing opportunities for interaction and cooperation; involving students in planning and evaluating activities and projects; respecting their personal dignity; encouraging them to find personal meaning in ideas and concepts; trusting them to carry out projects responsibly; having positive expectations of students; encouraging them to challenge others' ideas and to seek support for their own; recognizing the influence of various pressures on students and the resulting effects on their learning; sharing personal feeling with students; being flexible; and treating students' mistakes as opportunities for new growth.

Operating From and Eliciting a State of Mental Health

The mental health model of Mills and his colleagues suggests that children's school experiences can reverse the impact of prior learned insecurity. Again, young people, the model argues, are capable of functioning at two distinct levels of understanding. When in a negative state of mind, lower level of consciousness, or low mood state, their perceptions are determined by conditioned associations. If they don't understand how their own thinking process works, this negative level of functioning is perpetuated and they mistakenly conclude that their interpretations are an accurate account of what is happening. Fortunately, these children are not always functioning in a state of mind that produces inaccurate perceptions, as documented by Patterson et al. (1982). Observations show that when they are in a relaxed, positive state of mind or mood, students process information objectively, use common sense and good judgment, and utilize competent problem-solving and learning skills (Stewart, 1984). Such findings illustrate, according to Mills et al. (1988), that when children's insecure associations are not

triggered, they naturally are able to function within an unconditioned, more objective frame of reference in which they enjoy learning, are able to learn by insight, and do not feel they have to prove themselves.

The model argues that children's natural state of functioning is from a state of mental health (wherein they have an awareness of and access to a deeper experience of self) and that when conditions that foster states of mental health are present, even those for whom that state is "buried" relatively deeply will move toward such a state. This is where the teacher comes in. When the teacher is able to get through or around children's conditioned, insecure thought systems, students' positive sense of self can be elicited along with its qualities of self-esteem, curiosity, motivation, and common sense. How does the teacher accomplish this?

The key to children's mental health according to Mills and his colleagues (Mills, 1987, 1990a, 1990b; Mills, Dunham, & Alpert, 1988; Stewart, 1984; Stewart & Timm, 1990), is the teacher's own level of consciousness or mental health. Teachers functioning from their own core of mental health have a deeper experience of their self, feel good about themselves, are relaxed and at ease. They thus are able to access their own common sense and respond to their students appropriately as each situation arises, and naturally create a learning environment that fosters mental health in their students, thereby eliciting students' deeper experience of self. Their students, in turn, are in higher mood states, feel good about themselves, are interested and motivated to learn, and are creative and productive.

The first step, then, in eliciting students' positive sense of self is for teachers to monitor their own state of mental health. When functioning from higher levels of consciousness, from their own deeper self, they are more able to elicit this state in others. Some guidelines for

accessing and continuing to operate from such a state of mental health self include:

- staying calm
- eliminating thoughts that generate negative feelings
- eliminating thoughts that produce stress
- monitoring our feelings and moods
- remembering that students have their own separate realities and are doing the best they can given how things look to them
- not taking students actions and behaviors personally
- remembering that students aren't bad, just insecure
- having a sense of humor

Again, once they are functioning from their deeper experience of self, teachers have their own common sense and inner wisdom available. Rather than looking for general tips and techniques, their common sense will lead them to actions that are appropriate to specific situations and students.

The second step is to pay attention to the mood of students. Trying to teach when students are in negative or lower mood states is a losing proposition. Time would be better spent doing something to raise the mood level of the class before trying to teach. Treating students with dignity and respect, maintaining an environment that is safe, providing opportunities for them to feel successful, taking time to all the class to calm down, and maintaining a light-hearted attitude, all contribute to a higher mood state for students.

Third, teachers can teach their students about their psychological functioning. Students can understand how their minds "work." Helping them to see how thinking produces feeling and behaviors, thought cycles become self-fulfilling, and separate realities operate, and moods

come into play will empower students to begin to access their own mental health and positive sense of self.

Finally, if teachers provide students with an opportunity to participate in decisions that relate to their concerns, interests, and work so that they believe that they are being treated fairly, their input is valued and used, their best interests are being taken into account, and their needs are being regarded and respected, then teachers will be less likely to trigger their students' insecure levels of consciousness or moods. When such supportive conditions exist, students will more likely follow their natural tendency to want to function on a positive level, will do so, and will be interested in and enjoy what they are doing (Mills et al., 1988).

While this approach may sound so simple as to be simplistic, it works. For example, Stewart (1984) demonstrated that a teacher who established higher levels of consciousness for herself -- by calming down, setting aside negative thoughts and feelings, planning lessons she would enjoy teaching, etc. -- and then used her positive feelings to, in turn, establish rapport and a higher mood state with her students through whatever means seemed appropriate at the time -- including reading stories, telling jokes, sharing treats, providing opportunities for calming down, etc. -- produced greater reading score gains (three times higher) than a teacher who focused on and completed more of the reading curriculum being used with both groups. J. Timm (personal communication, July 20, 1990) reports that at-risk high school students' grades increased and suspensions decreased as a result of classes in which they learned about their own psychological functioning.

Mills (1988), in describing the impact that this model can have notes that, as a result of teacher training in this model of mental health and its applications, teachers, after one year,

reported that they enjoyed teaching more, felt less stress, functioned at higher mood levels, and were more creative in their teaching and in their ability to involve students in the learning process. Teachers also reported that by understanding how they and their students function psychologically, they were better able to help their students feel more secure in school and in learning situation; increase their students' interest and motivation toward learning; and help their students discover that learning is not as difficult for them as they had believed.

Mills (1990c) reports further that of a group of students who worked for three months with a social worker trained in this approach:

- 30% raised their grade point average by at least one full grade point;
- the number who received failing grades dropped from 63% to 46%;
- attendance in the group increased by 30%; and
- discipline referrals dropped by 46%.

At the end of one year of students working with this social worker, dysfunctional school behavior (discipline referrals and suspensions, expulsions, drug-related incidents, and referrals to the juvenile justice system) had dropped by nearly 75%. These decreases were sustained during the second and third years of the program.

Conclusion

This paper began by noting that the self plays an important part in motivation and learning. A model of mental health has been described that places self-esteem, motivation, common sense, and the ability to learn by insight at its core. It has been suggested that this state of mental health is a key to teachers eliciting and students accessing their positive sense of self and, therefore, enhancing motivation and learning. It also has been recommended that more

attention be paid to the ways in which teachers can positively impact students' sense of self, based on a model of mental health which facilitates access to the deeper self. Specific recommendations have been given to assist teachers in eliciting this deeper experience of self in students. The next step is to train teachers in this approach and then to systematically study the effects on students' positive sense of self, their motivation, and learning, so as to gather more data on what appears to be an encouraging and effective intervention.

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THE DEVELOPMENT OF AN INSECURE BELIEF SYSTEM

Natural State of Mental Health	Amount of Insecurity and Stress in the Immediate Family	Other Exposure to Negative Beliefs about Learning and Performance
•Potential for common sense	•negativity	•peers
•Natural curiosity and eagerness to learn	•hopelessness, feeling overwhelmed	•media
•Natural motivation to do well by developing talents	•chronic emotional stress	•culture
•Ability to process information objectively efficiently	•judgment, blame	•community
	•disinterest, apathy	•teachers

Thought System
Perceptual Filter

Figure 1

RESULTS OF COGNITIVE CONDITIONING

Contents of Belief System

Poor self-concept

Beliefs that learning is hard

Beliefs that they don't fit-in

Beliefs that others don't like-them

Expectations of failure

Expectations that others' motives are hostile

Attributions that people are out to get them, make them look bad

↻ CONDITIONED THOUGHT SYSTEM

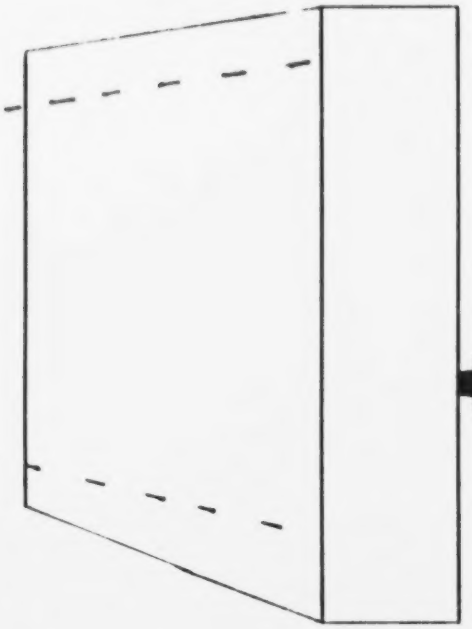
PERCEPTUAL FILTER

Figure 2

THE WORLD OF REACTION

NATURAL COMMON SENSE

"WISDOM"



Situation

External: Event

Person

Thought

Emotional Response

anger
resentment
depression
guilt
paranoia
fear

Action or Behavior

Reaction

(of self and/or others)

Subjective, conditioned frame of reference, interpretations, judgments, biases, beliefs.

Figure 3

THOUGHT CYCLE

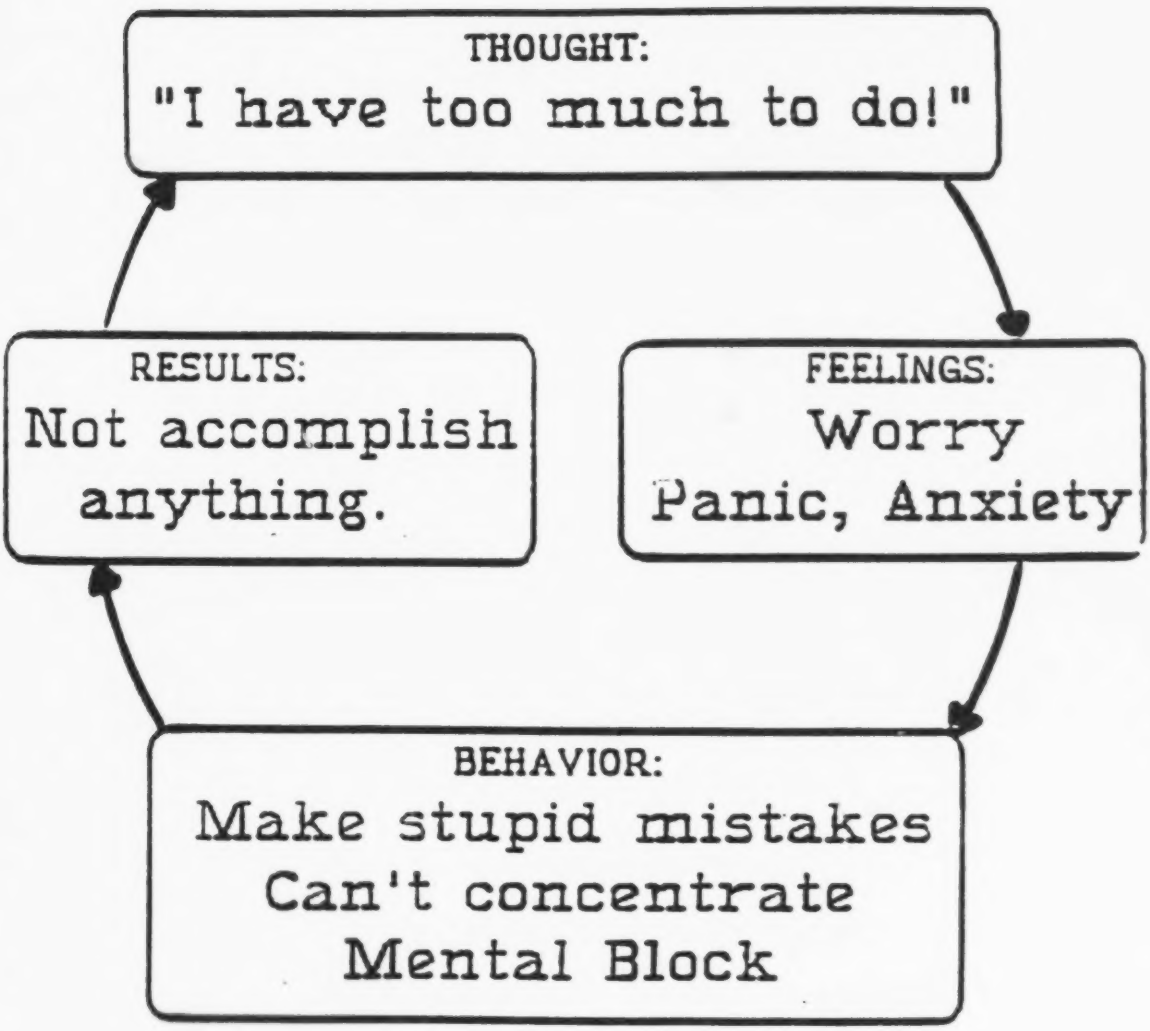


Figure 4